

Evidentiary Document No. 5064B.

INTERNATIONAL MILITARY TRIBUNAL FOR THE FAR EAST

NO. 1.

UNITED STATES OF AMERICA AND OTHERS

ARAKI, SADAO AND OTHERS.

I, BURNETT LESLIE WOODBURN CLARKE of BRISBANE in the STATE of QUEENSLAND, MEDICAL PRACTITIONER, make oath and say as follows:-

I was QX.22806 MAJOR B.L.W. CLARKE, 2/13 A.G.H. 7 AUST. DIVISION, when I became a prisoner of war in the hands of the Japanese Forces.

2. We were captured on the 13th February, 1942, two days before SINGAPORE fell. Our hospital was left alone until approximately 20th February, 1942. A series of Japanese came out, had a rough look over the hospital and told us we had to be moved out to SELERANG BARRACKS within five days.

3. We had approximately 1800 patients on our hands. Two thirds were battle casualties. We asked for time to allow some of these seriously wounded men a chance to recover. The Japanese refused. They supplied us with/certain amount of transport. By over-crowding the vehicles with men and material, everybody received transport to the new area.

4. On arriving at SELERANG we were given a long barrack building which we had to clean up. By cleaning up, I mean wreckage had to be shifted where shells and bombs had exploded. The space allotted to each man was 6 ft. by 3 ft. with no provision for passages between the beds which were jammed up against each other.

5. Our ration of water was one quart per man per day for all purposes. This water was infected and had to be sterilized by boiling before we could drink it. The fuel ration was 2½ lbs. of wood per man per day.

6. It was extremely hot at the time and naturally a great deal of contaminated water was drunk by the men. Dysentery followed. I am not quite certain of the figures, but I believe 5,000 out of 12,000 men got dysentery in the first three months. In addition the hygiene system had completely broken down. The Japanese did not give us any tools to dig latrines. This helped the spread of dysentery. It was approximately ten weeks before they would give us any tools or covering for the latrine pits.

7. After being in SELERANG for two weeks we were ordered to move to ROBERTS BARRACKS about one and a half miles away, the Japanese idea being to make one combined hospital in a separate area. A limited amount of transport was given for this second move, so that really only the sick were transported. The rest walked. Conditions in ROBERTS BARRACKS were worse than in SELERANG. A tremendous amount of damage had been done by bombing and shelling and we had to clean this area up in the same way as we cleaned up SELERANG. We repaired

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various buildings, using a little bluffing to get some of the things we wanted. In the meantime the Japanese had put us all on the I.J.A. ration which consisted mainly of rice. Our medical men pointed out that this diet was definitely deficient in proteins, fats, vitamins, etc., and that within two months deficiency diseases would follow, and in April 1942, a large number of men came in suffering from beri beri. This was followed in subsequent months by a great many other deficiency diseases, such as amblyopia, scrotal dermatitis, glossitis, stomatitis, pedialgia (happy feet) and various forms of paralysis. An appeal was made to the Japanese for rice polishings to counteract some of these deficiency diseases.

After some considerable delay, approximately two months, they gave us some rice polishings and told us we could buy some more from them. In my own private opinion the Japanese showed no interest in our food at all. That was the general attitude of the Japanese.

8. My own personal problem was in connection with my skin ward (I was A.I.F. Dermatologist) and with the lack of dressings and medical supplies, an appeal for dressings was answered by receipt of a truck load of old clothes, towels, various discarded bits of linen and other fabric which we had to sterilize ourselves, with no increase in water or fuel ration to help us.

9. About the end of 1942 approximately 150 men were brought in from Kuala Lumpur Gaol. These men had been cut off during the war, incarcerated and, in addition to the ordinary deficiency diseases, they were covered with scabies. Up till that time we had no scabies. After this we were not able to eliminate scabies from the prison area in Changi, mainly because the Japanese would not give us any extra medical supplies or dressings. Requests for such matters as hot baths failed to rouse the interest of the Japanese. However, by careful management on our part, we could give a certain number, roughly 40, hot baths per day. More vital drugs of the Benzol group were refused. Scabies rapidly became infected and opened up the way for Diphtheria involving the skin. In the early days we had brought in some anti-diphtheria serum, but the Japanese gave no replacement to my knowledge until 1945, and then only very limited amounts, so that only selected serious cases could get the serum. Certain skin diseases, such as tinea, reached tremendous proportion and after our own limited supply which we had brought into the camp had run out, the Japanese only gave us the barest minimum which was totally insufficient to cope with the outbreak of skin diseases.

10. Malaria: Before the war Singapore and lower Johore were malaria free. Japanese made no attempt to control the spread of malaria with the result that over 80 percent of the prisoners were infected with malaria. Owing to the limited supply, our treatment of malaria was totally inadequate. Large numbers of patients who have returned to Australia can tell of 30, 40, or 50 recurrences.

11. With regard to deficiency diseases, appeals were made to the Japanese for

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response was negligible, but we had been able, by what amounts to bluffing, to get the Japanese to pass over to us large quantities of Marmite which we knew was stored in the British Medical Depot in Singapore. Sometimes the quantity given was adequate, but more often it was totally inadequate. We were reduced to rationing Marmite amongst the very sick. It was impossible to use it as a prophylactic.

12. For the first five months about two ounces of meat per man was brought into the camp twice a week. This ran out about August. A Red Cross ship came in in September 1942 and the Japanese delivered to us fairly large supplies which carried us on for three months. We received food and some medicines. The food consisted of such things as bully beef, ovaltine and marmite. Personal observation here is that it was the intention of the Japanese to fatten the men up prior to removing large parties to other parts. These big parties began to leave CHANGI in late January 1943 up to May 1943. It was subsequently found that the parties referred to had been sent mainly to Burma, Thailand, Borneo, and Japan. After these parties had gone conditions temporarily improved owing to the exodus of such a large number of men. The Japanese said they were going to substitute fish for meat. The majority of the load of fish that was brought into camp consisted of little things about 2" to 3" long which appeared to be several days old and in the majority of cases, were totally inedible. We used them for fertilizer for our gardens.

13. In December 1943, a large portion of F Force returned from the Burma-Thailand Railway. These men were in a shocking condition suffering from gross attacks of beri beri in its various types, malaria, tropical ulcers and gross debility. The loss of weight was simply appalling. The average loss of weight would appear to be in the neighbourhood of 70 to 80 lbs. per individual.

14. Approximately 80 percent of these men had to be admitted immediately to hospital, and we were confronted with three serious problems - (1) The lack of beds of any sort for the men; (2) the replacement of clothing, and (3) the enormous drain on our minimum medical and food supply. To my knowledge the Japanese made no attempt to replace any hospital equipment such as beds, bedding and other important equipment until after the 16th August 1945. Many of the men who returned from Thailand F Force had to lie on bare boards or on the concrete floors. We appealed for clothing but the appeal fell on deaf ears.

15. Early in 1944 more parties were returned from other parts in the same state.

16. In April or May 1944, after many appeals to the Japanese, they decided to set up another hospital at Krangi. The remainder of our beds and bedding was sent out to Krangi where it was the intention to establish a 600 bed hospital essentially for the treatment of chronic cases such as T.B., Gastric ulcers, etc. This hospital came under combined British and Australian control while we were left in Changi with pro-

ordered the whole of the area to be vacated and a hospital set up in the outskirts of Changi Gaol. Here the men were housed in 100 metre huts and approximately 220 men had to be accommodated in these huts. The huts were built of bamboos, cocoanut palm and other jungle material. Many of them were not even waterproof. The men lay on platforms, the space for each bed was 6 ft. by 3 ft. for all purposes. Further appeal for some sort of bedding, blankets etc., was refused.

17. Medical supplies and dressings were almost exhausted. The Japanese refused to replenish them. Many of us endeavoured to devise means of overcoming these difficulties regarding drugs, e.g. iron as a tonic for anaemics was made in our camp by our Engineers. The lack of supply of vitamin was to a certain extent overcome by extracting the juice from grass and certain local flora. The Japanese did not make any attempt to interfere with our own efforts.

18. After removing to Changi gaol area in June 1944 the food position became acute. The Japanese greatly reduced the ration so that early in 1945 the men were showing very definite signs of emaciation which gradually got worse and worse until the surrender.

19. Coinciding with this gross emaciation there was a tremendous increase in the sickness rate. The men were in such a debilitated state they easily contracted any other diseases, such as boils, many of which became infected with diphtheria; lung condition such as T.B. and pneumonia; while as a result of the shocking diet the men developed various forms of dysentery and many forms of diarrhoea which resulted in many deaths.

20. The difficulties all the time were being increased by the arrival of large parties of Dutch, British, and Australian, prisoners of war from Java, Sumatra, and other parts of the N.E.I. All of these were in an appalling condition and no help was given by our hosts regarding food, medical supplies, or the elementary requirements of an ordinary camp.

21. The lack of clothing was having a very disastrous effect on the men and in about February 1945 a disease which we regard as pellagra established a firm hold on the prisoners of war. I am definitely of the opinion that had the Japanese supplied us with reasonable clothing and reasonable food this outbreak would have been averted.

22. Right through the whole period that we were interned it was impossible to eradicate scabies, tinea in its many forms, dysentery, malaria and the general deficiency diseases such as beri beri, palagra etc. My own private opinion was that the Japanese desired to exterminate us by these means. Their attitude was one of total indifference and the results were only to be expected.

23. On approximately the 16th of August 1945 the Japanese brought into our camp enormous numbers of soldiers

blanket, one pair of shorts, shirt, boots, socks. The food supply was extremely extravagant, the rice issue jumped from 12 to 30 ounces per day, tons of butter, cheese, milk and meat were brought in such huge quantities we could not possibly handle them. I saw the mark "NORCO" on some of the butter. This food was in quite good condition and although the date on one parcel of New Zealand butter was 1933, it was still good. In addition enormous quantities of medical supplies were brought in, including vitamins atebrin, and other drugs, which we had been desperately wanting over the last three years. We believe this material had been available all the time

24. As regards the Red Cross, my observations were that a Red Cross ship came in in September 1942 and for three months good supplies were handed to us. In March 1944 a small shipment of Red Cross food was brought in which lasted about three weeks. The next was in March 1945. One Red Cross parcel, approximately 7 lbs., was distributed between 26 men on Wednesdays and Sundays. That lasted ten weeks. This food really only acted as flavour. On many occasions we saw Japanese smoking Camel and Player cigarettes. The packets were quite fresh. They were similar to the ones the Red Cross issued to us after the Japanese surrender. On several occasions I saw Argentine Bully Beef tins discarded by the Japanese. Argentine Bully Beef was supplied to us after the Japanese surrender.

25. The only marking on the hospital was a Geneva flag in the middle of the camp. Lights out was at 10 p.m. and we were not allowed to use lights in the wards after this time. Japanese guards used to come to the hospital for treatment.

26. The Japanese D.D.M.S. of Changi was Capt. Suzuki. I personally interviewed him on more than one occasion. I made many requests of him; none were acceded to. I cannot recollect him granting any request.

27. In approximately September 1944 the Japanese issued three scales of diet; heavy duty, light duty, and no duty. This meant that the sick men got only half the ration of a man on heavy duty. The heavy duty ration was in our opinion, totally inadequate even for a man in a sedentary occupation. This continued until the day of surrender.

28. The Japanese also refused to pay anybody who was not on duty. In other words - no pay, no food for the sick men.

SWORN BEFORE ME AT BRISBANE ON THIS)
13TH DAY OF SEPTEMBER, 1946.) (Signed) B.L.W. CLARKE.

(Signed) A.H. DELKIN, J.P.
JUSTICE OF THE PEACE.

Ex 176A
Doc 5064B

證據書類第五六四B

極東國際軍事裁判所

第一

アトリカ、合衆國其他

元木貞夫其、他

一、私「クインスラード州」アリスベイ」出身、開業医師、ハネル、
ヒスリ、ウッドバーン、クラーク、ハ該二名被擧之時、如該二名
致シテ、

私「日本軍、手に傷害アリ時、軍械第7師團、乃、陸軍病
院、所、少佐、ビス、エル、グアリス、クラーク、(Q、X二八六)」下、ア
リ。

二、我「一九三一年(昭和十六年)一月十三日新嘉坡、兩港二日前、停泊アリテ
シテ、我「ノ病院、太風、一九三一年(昭和十六年)二月二十日墳、迄其、傷害ア
リガ、隊、日本人がヤツテ來テ病院ヲサント既過二日後、五日以内、セ
シラフ、兵舎ニ移動シテハラスト申シ渡、ヤシタ。

三、我「ノ病院、太風、一千人、傷心者アソシカ其ノ二分、二、三、戰傷者
アタ。我「重傷者心者、回復スル迄猶豫、願ヒ山々カ日本人ハ
之ヲ拒絕シテシタ。日本人ハ或ハ程度、輸送力、我合ニ提供シテ
居シタ。人ト荷物トが事ハ、二、三日、人込マラ全則新ノ地域
へ運ベシタ。

四、「セドリック」到着スル迄イ一棟、兵舎ヲ提供セシ然ル是ヲ擯除
シテケレバ、クソク。擇、陣ト云々、ハ、泡澤、ヤ馬場、三澤、波列松、ノ

loc 50648

殘骸物ヲ取り除カレバナラナカツタノテアル。各人が割當テラレタ
場所ハ三尺ニ六尺テ、贋占が間障無ク並ベ立テ、アリ、通路サヘ満備
サレテヰナカツタノテアル。

五、水ノ配給量ハ一人當り一日一「クオート」(約六合ニタ)テニヨ有ニユル用途
ニ使用ニナシレバナラナカツタ。此ノ水ハ黴菌ヲ含有シテイタノテ飲ム前ニ
煮沸シテ殺菌シナシレバナラナカツタ。燃料ノ配給量ハ一日一人當リニ封度
半、一新テアリシタ。

六、其ノ項ハ猛烈ニ暑カツタノテ自然ニ多量ノ不潔ナ水ヲ飲ム者ガ多クツ
タ其ノ結果赤痢が發生シタ。其、數字ハ餘り確クテハナシガ一萬ニ千名
ノ中五千名が最初ノ三ヶ月間ニ赤痢ニ罹ツタト也ニマス。其ノ上衛生設
備が全く破壊サレテシマツタガ、日本人ハ我々ニ便所ヲ掘ル器具ヲ附ヘテ是レ
方ツタ。是が赤痢ノ蔓延ヲ助長スルコトナシタ。約十週間経ツテカラ
初メテ日本人ハ器具或ヒハ便所穴ノ蓋ヲ失レタノテアツタ。

七、二週間「セララング」ニ滯在シタ後、一程半ハカリ離レテイル「ロバース」
兵舎ニ移ルヤウニ命ゼラレタ。日本人ノ考ハ別ノ地方ニ一ノ聯合病院ヲ
造ルコトデアツタ。此ノ第二回目ノ移動ハ極ク限ラレタ輸送力が提供サ
レタノテ病人タケガ乗物テ送ラレ、他ハ徒步テ移リマシタ。ロバース兵
舎ハ「セララング」以上ノ悪イ状態デアツタ。爆殲キト砲殲キトテ莫大損害ヲ
蒙ソテ居ソ、我々ハ「セララング」ヲ掃除シタ同様、此處モ片付ケナケレバナラナ
カッタ。我々ハ各種ノ建物ヲ修繕シタ、ソシテ欲シイ物ヨリ獲ル爲ニハ
多シ日本人ヲ騙シタ事モアツタ。其内日本人ハ我々全部ノ糧食ヲ米
ヲ主トスル日本帝國陸軍配給制ニシテマツタ。

我々ノ歴史考

No 2

1943.5.10

連中ハ此、食物ハ明ラカニ食白質、脂肪、ウツミン
等が不足シテ居ルコト、又二ヶ月以内ニハ此等、飯主
症患者が發生又水コトヲ指摘シテ。斯クテ一九四二年
四月二八多數、皆が脚氣ア皆シニ至ルタ。其月以
後多數其、他各種、缺乏症、例ハ視力薄弱、
陰性寒炎、皮膚炎、舌炎、口渴等、ヘチヤシ等アヘ
足、疾患。其、他各種、麻痺症が引續キ起ツタ。
此等、缺乏症ヲ緩和スル為、據テ呉レヒヤウ日本人
人二訴ヘ出マシタ。

相當期間(久見二月)ニ連中、後、若干量、糧
ヲ支給シテ景氣アリ、モレト入用ナラ日本人リヲ貿易ハ
ト謂ヘレマシタ。私個人、考テ日本人ハ食、食物ニ付
テハ全然何、關心を持テナカッタ。ヨリ日本人一般、能度アリ。

八、私個人シテ何問題ハ皮膚病全體亦ナシテ、一概に満洲
軍共際皮膚門醫アリセシ。珊瑚及ヒ螺蟲が不足シテナカッタ
ハ、珊瑚要來シテヨロシク、トランク一箱ニ積ムタ方普、古タオル、毛衣不
用ナリ。布、端巾等其他、織維が到着シマシタ。ヨリ等ハ我自
身テ消毒シナケバナラナカッタ。又我ア物ケ山爲、水や燃料、
油、火ナカッタ。ナリマス。

1943.6.10

九、一九四二年(昭和十七年)、東便人凡百五十名が「アラル
ン」アラルン刑務所ヲ連ヒテ來テシタ。此、人達ハ戰爭中被斷
セラヒ獄中テ居タ事無普通、缺乏症罹リテ在上二疥癬ア
身外中、疥癬ハナテ居リテシタ。其時連我、方ニ疥癬ハ無

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クラクチ等が其、後、セヤンガ、停戦交渉所地域カラ齊賛ヲ除長大シコトハ出来テカツ。其、主タ原因ハ日本人ハ何等臨時、薬品及び繩帶ヲ供給シテ莫レナカツタ爲テ也。温添等ニシキ要求シタノデアシガ何等日本人注意ヲ乞クトモ出来ナク終ソシナシ。シカシ或々、方テ充分注意シテ適切準備ヲシタニ一日大凡四十名、者ニ温添セシトガ出来シタ。ベシゾレ類テセシト重テ、薬品ハ供給ニテ六七方カツ。齊賛、急送ニ言及シテ、皮膚、マダフテリヤ、原因トナリニ至シタ。當初被々ハサワリヤ、隊防及清ヲ持ツテ未タ、デアシガ、私、シテアリ限リ日本人ハ一九四五年迄補給シテ莫レナカツ。シカセ其、補給ハ種メテ限リシタ少量デアシタニ、重症患者、ミシカ細清ノ度カラシナ状態アリタ。輪齋、様々或々種々皮膚病ハ非常十割合ニ達シ、我々が收容所ヘ持ツテキタ限リシタ當品が全部消費ナシタ後、日本人ハ始メドリニタ量歩限度量ヲ突破シテ莫レタが、ソレニ皮膚病率ニ一封抗入化ハ全ク不完全テアロク。

No 4

十一、マダリヤ、戰前新嘉坡及下タラルニハマラリヤ、ハ無カツタニテア。日本人ハ何等マダリヤ、傳染ヲ防ガキ打タナカツ。其、結果停戻ノ中八割以上モマラリヤ、ニ感染入ルニ至シタ。薬品類が制限サシキタノデナシマラリヤ、ニ對人治療、全然不完全テアシタ。濠洲帰還シタ多數、患者ハ三人、平均或五人再発者、出現物語之事が出来ベシ。

十二、銀立症ニ付テ、食事、改善及、穴タミン、供給ト日本人ニ許ヘシタガ、其、反應ハ間ニニ足ラナ程テ

十六

最初五ヶ月間ハ收容所ニハ一週間二回一人当り約二オンス(約十五匁)、肉が持4ヶ月トシタガ、八月頃ニハ之ハ無クナツテレツタ。一九四二年(昭和十七年)九月ニ赤十字船ガ入港ニ日本人人食々可ナリノ量、補給アシテ呆レタ、于其後三ヶ月間ハ持4基ヘ、事ガ宏々タ。我々ハ食料及若干、醫藥品ヲ支給サレタ、テアルが食料ハ罐詰牛肉、オバルケン、及ビ野菜、卫キスノ様ナモ、アツク。私、個人的觀察デハ、之ハ大部隊ヲ他、方面ニ移動サ人、前ニ停滯達ラセルト云、ガ日本、意圖アツク、アル。此等、大部隊

アツク。併ニ竊ス様十手段、テ我々が以前カラ知リテ、新嘉坡、英國醫藥貯藏所ニ貯ヘテアツク大量ノ野菜、卫キスヲ日本人が取ク、方ニ渡スヤウニ成功シタ。或此時、我々ニ渡セタ量ハ充分アツクガ、度々ハ金タ不充分アリツシタ。我々ハ重症患者中ニ卫キスヲ分配スルヤウ制限ニナケレバナラナカツタ。我々ハソレ豫防蘇トコト使用スルトハ不可能アリツシタ。

アツク。併ニ竊ス様十手段、テ我々が以前カラ知リテ、新嘉坡、英國醫藥貯藏所ニ貯ヘテアツク大量ノ野菜、卫キスヲ日本人が取ク、方ニ渡スヤウニ成功シタ。

或此時、我々ニ渡セタ量ハ充分アツクガ、度々ハ金タ不充分アリツシタ。我々ハ重症患者中ニ卫キスヲ分配スルヤウ制限ニナケレバナラナカツタ。

我々ハソレ豫防蘇トコト使用スルトハ不可能アリツシタ。

Oct 5064 B

ハ一九四三年(昭和十八年)一月末カラ同年五月迄ニヤンギ山ヲ出發ニ始メニタ。
今申ニニケタ各部隊ハ主トニテビルコ、泰國、
ホハネオ及ビ日本ニ送ラレタト云フ事ガ其
ノ後判明ニタ。此等、部隊ガ出發ニタ後、
大勢、人々、退去、為一時的ニ狀態ハ良
ナシ。日本人内、代リニ魚ヲ給與スルト言
ヒニタガ、收容所ニ持ケ込フタリ、大部
分ハ二時カラ三時位、長サ、小サモ、テ見タ
トコロ數日経テ古イモラニク大體、場合
全ク食べル事ガ出來ナクテ農園、肥料使
ヒニタ。

十三 一九四三年(昭和十八年)十二月、下部隊、大
部分ガビルコ、泰鐵道カラ歸シテ來ニシ
タ。此等、兵達ニ總體ニ各種ノ酷イ脚氣、
ラリヤ、敵帶演場及酷イ衰弱ニ憊ン
テ居リ、慘澹タル狀態テアツク。體重、
減少、器具等失クベキモノガアリ、平均體重、
減ナハ一人當リ七十乃至八十キロ前後テ
アルヤウニ見受ケラレタ。

十四、此等、兵達、約八割、直ニ病院入收容シ
ナケレバナラナカクノ事ニテ我々ハ三ツ、重大
問題ニ直面スルニ至シタ。

1944.8.20

16.7

(一) 此等人々ニ與ヘル如何ナル種類、寢室モ無イコト
(二) 衣類ヲ替ヘル事
(三) 限テ又醤油品及び食料、莫大ニ消費
テアリシテ、私、知トコロナハ日本人ハ一九四五年(昭
和二十年)八月十六日迄、寢室トカ寢具トカ其他
ニ必要ナ調度ロコトド、病院用設備ヲ補給シ
ヤウトハニカツク、テアル。泰國、戸部隊カラ
歸ツテ未タ多數、兵達ハ板、間又ハ
コソクリト、床、上ニ横臥シケレバナラナ
カツタ。

我々ハ衣類ヲ吳レル様許ヘタガ馬耳東
風アツク。

十五、一九四四年(昭和十九年)、初メニハ他、部
隊が各地カラ同様十牀能テ歸ツテ
來タ。

十六、繰リ返シ許ヘタ結果一九四四年(昭
和十九年)四月日本人ハクランギ¹レ
ニ別、病院ヲ開設スルコトニ決定シタ。
我々、齊ツテイル寢室及ビ寢具
ハクランギ¹ニ運バシ、ソコテハ肺病
ト胃潰瘍等、特ニ長期疾患ヲ治療ス為六百

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此人、収容入院、設備計画テアリ、ナリス。此、病院、収容共同管理、下に置キ、一方我、我、病院設備之殆ド然アリヤシニヤレニ。然サレマシ。之ニ加ヘルニ直ニ日本人、我々ニ此、全地带ヨリ立退キ、ナヤシ。刑務所、外郭ニ病院ヲ建テ、命シテア。コトハ兵達ハ百メト小屋ニ住マハサレ、大凡二百二十名、兵が此等、小屋ニ収容セラナレバナラナカツ。小屋ハ竹、柳子、葉ト其、他、檜木、材料テ造リ、其、多く雨が漏ラヌ様ニテナカツ。兵達ハ、プラントオムニ横ニアリ、各自、寝心場所、六尺ニ三尺、トコロテ、ソコタケテ凡テ生活シナケバナラナカツ。更ニ寝具、毛布等ヲ申請シタハ拒絶セレシ。

十七、醫藥品及調節、殆ド消費シ盡セタ
ガ日本人、是等ヲ補給不事ヲ拒ン、我々多クノ
着、薬呂ニ闇、是等困窮ニ打斗勝ツ方法ヲ
有互ニ分ナ合ウト物カシ。例ハ、食血症ニ对于
之、杜創トシテ鉄分が収容所内、我ガ板脚、
手テ作リタ、ヒタミニ、補給不足、草及ニ或

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ル種、地方、化カラ其、汁液ヲ抽出シテ、或少程
度凌ギマシタ、日本人、我々自身、努力ニ付シ
一向腐敗シマツトシ十カタ。

所地城、一九四四年（昭和十九年）六月廿二日、刑務
移転後、食糧事情ハ逼迫シテ
未だ。日本人、我々、配給ヲ非常ニ減ラシタ
一九四五年（昭和二十年）、初頭、兵達ハ非常ニ
顯著十憔悴狀ヲ呈シテキテ、コレハ日本降服
至迄段々悪化シテアル。

十九、此、甚シイ憔悴ト致シテ、惟病卒、
驚愕ノ程増加シタ。斯カラ衰弱狀態テツタ兵
達、容易ニ他、疾病例ハ、腫物、如ナ、タ、
場合ヲフテリ亡ラ感深シ。肺病及心肺疾等
肺疾患ニ惟リマシタ、一方心ハ、食物ヲ摶フ
結果兵達ハ各種、赤痢・下痢ニ惟リコ
ク多々、死者ヲ出スニ至シ。

二十、廿六、乙、乙ト亡其、他、蘭領、印度各
地カラ和蘭、英國及濠州、停滯、印度、大部隊

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ガ到着シタノデ 困難ハ不斷ニ増加スル一方、テ
アリマシタ、此ノ人達ハ皆尊クベキ状態、テシカ
モ、我々ノ主人公ハ食物、医薬品、或ハ普通收
容所、根本的必需品ニ行テハ何等援助、
シマセンデシタ。

二十一、衣類、缺乏ハ兵達ニ非常十不幸十絶
果ヲ齎ニ、一九四五年（昭和廿年）二月頃、玉蜀黍
紅斑病ト認メラレル一種、皮膚病ガ浮腫達ニ
頑固ニ喰ニ入りマシタ。若ニ日本人ガ適当ノ衣類ヤ
適当ノ食物ヲ給與シタナラニ、病氣、發生ハ避ケ得ラ
シタモト私ハ確信シテキマス。

二十二、我々が抑留セラレタ全期間ヲ通ニ、疥癬、
各種、輪癬、赤痢、マラリア、及び脚氣症、玉
蜀黍紅斑病等ノ如キ一般缺乏症ヲ撲滅スルコト
ハ不可能デアリマシタ、私個人トシテ、考テハ日本人
ハ是等ノ方法デ我々ヲ根絶セニシタノダト思ニシス、
日本人、態度ハ全く無関心デアタソシテ、其、結果
ハ推シテ知ルベシテアリス。

二十三、一九四五年（昭和廿年）八月十六日頃、日本人ハ
我々ノ收容所一莫大ナ補給物資ヲ持キミマシタ、
各自ハ少トモ毛布、股引、シャツ、長靴、靴下、各揃
ヒツ支給サレタ。食糧ハ非常ニ贅澤ニ

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ナリ米、配給量ハ一日二体キ二オノスカラ三十ニスアテ
一足飛ビニ道ヘマシタ。バタ、ケース、ミルク、及ビ肉、罐詰、穀
ガ取扱に難不化。何頃モ大量ニ持マシタ。然ハ東ハタニ
ノト言フ印ガ附キモル。見タ。此、食量、割合良好ナ故能
テ。ヨーロピド、罐詰バタ、或ニ包装、日附ハ五ニ三年アリタが
ス。ダニ等アリテモナシア居ナシタ。其ニニヨタニシ類アタブリ
其他、薬品、食糧、莫大量、酸酒、糖品が持ケコマシコト等ハ過
去ニテ年毎極度ニ缺えニテキタ。是等、材料ハ何時モモ
供給シ得タモ、タラウト物々信ロシス。

而、赤十字ニ關スル私、観察ハコウデアリス。即ナ四三年一月
十七年九月ニ赤十字船が、進入港ニ三月同、良イ配給が然ニ渡リ
マス。一九四四年(昭和十九年)三月ニ赤十字食糧、食量が到着シタが
此ハ約三週間續キマシス。次ハ一九四五年(昭和二十一年)三月テアリマシタ
約二封度、赤十字小包が水體日後日曜日ニ二十八人二個宛命配セラレ
此ハ十週間續キマシタ。此、食物、實際ハ味ト身カラニ過半
ナカラ度々日本人が、ドヤメルシヤアレイヤ、煙草ヲ吸ツサリヲ、俄
々見カケマシタ。它裝、割合新シケテ日本降服後赤十字が、然ニ
支給シタト同一アリマシタ。

アルセニン、罐詰牛肉罐詰、空罐ヲ日本人が棄テ、置カタ、散見
カケタガアルセニン、罐詰牛肉罐詰モ日本降伏後、然ニ支給セラマシタ。

11.1. 病院ニテアリタ標識ハ、收容所中央、ヤホハ、旗、ミテアリタ。
燭燈、午後十時アユ、時向后ハ病室中、燈ヲ用アルコトハ許セマセニ
アシタ。日本軍守備兵、達治療ヲ受ケニ何時モ病院余下居リマシタ。

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二十六「ナヤニギ」日本陸軍騎馬部隊、騎士「鈴木大輔」アシタ、
彼は彼の回上個人的三面体ニシテ。彼は彼三八級度モ要求ヲシシタが
一度モ同意シタコトハアリフセシ如何ル要求ニ對シテモ彼が許可ヲ與ヘ
タラ彼ハ自ら出スコトガ出来ヤシ。

二七、昭四年(昭和十九年)九月頃、日本人会食事、三階級制度を決
メニシタ旨、車掌、駕駄、車掌等、及び無沙塵アリタガニ三種化ト病
人八重筋傳看、配給量、半分ニカ世其ナト言フ事ニテ居。八
重筋傳配給量、坐乗者看ニ取ササモ全ク不充分アリタ事
考ヘタ。丁度、制度、改定、日本酒、酒類、酒類、酒類。

平、日本人の又勞務ニ就かざる者ニ支拂フ拒绝シテ言葉換
ヘテ言ヒマスト病人ニ給料モ食モ醒ヘテト言フコトアリ。

「エリ、エリ、ゲダニウム、クルイナ」(福音書)

一九四六年(昭和二年)九月十五日 一九四六年九月十五日

余、面前、予宣誓也、

卷之二

子エッケゲイキン(署名)

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